

Periyar Nagar, Vallam Thanjavur - 613 403, Tamil Nadu, India
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UNIVERSITY**

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School of xxxxxxxxxxxx
Department of xxxxxxxxxxxx

FORM – DR5B

Minutes of the Seminar Talk I/II

Ref: PMU/ Year/ Dept. / Office Note No. / Date:

Respected sir,

The following research scholar of the department of ***** has given I / II seminar presentation on ***** at ***** in ***** , PMU.

Name of the Scholar	Register No	Seminar Topic

The research supervisor, faculty members, research scholars, PG students and UG students of ***** department have attended the seminar.

Herewith the feedback of the research scholar's presentation has been enclosed by the research supervisor and DC members for your kind perusal.

Research Supervisor

HOD / *****

Name:

Recognition No.

Remarks:

Date:

Dean (Research)

VC's Approval

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Attendance (Seminar Talk-I / II)

Name of the Scholar :
(in Block letters)

Register Number :

Department :

Mode of Admission : Regular Internal External
(Tick Appropriate box) Part Time Part Time

Name and :
Designation of the
Research Supervisor

Seminar Topic :

Date and Time :

Venue :

S.No	Name	Designation / Year	Department	Signature
1.				
2.				
3.				
4.				
5.				
6.				
7.				

Research Supervisor

Head of the Department

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Feed Back Form (Seminar Talk-I/II)

Name :
Register No : ----- (PT / FT)
Topic of the seminar :
Date :
Session :
Venue :
Name of the Supervisor :

Feed back:-

Name of the (student/Staff) :
Designation (Faculty) :
Qualification (Faculty) :
Department (Faculty/Student) :
Class/Dept :

Signature with Date (Faculty/Student):